



Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
De La Torre	Hector		[REDACTED]
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE ZIP CODE
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
OPTIONAL: E-MAIL ADDRESS			

1. Office, Agency, or Court

Name of Office, Agency, or Court:

State Assembly

Division, Board, District, if applicable:

Assembly District 50

Your Position:

Assemblymember

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ County of _____

☐ City of _____

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial

Date: ____/____/____

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through December 31, 2009.

☐ Leaving Office Date Left: ____/____/____ (Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 5

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes - schedule attached
Investments (10% or Greater Ownership)

Schedule B ☐ Yes - schedule attached
Real Property

Schedule C ☐ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☒ Yes - schedule attached
Income - Gifts

Schedule E ☒ Yes - schedule attached
Income - Gifts - Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

3-1-10

Signature

Schedule D
Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Hector De La Torre

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[illegible]

Form 700 (2009 Annual)
Schedule D
Income - Gifts
Hector De La Torre

Name of Source	Address	Business Activity, if any	Date	Value	Description
Bass for Assembly	777 S. Figueroa St. Suite 4050 Los Angeles CA, 90017		1/8/2009	\$72.52	Jacket
Bass for Assembly	777 S. Figueroa St. Suite 4050 Los Angeles CA, 90017		1/8/2009	\$11.95	Breakfast
Bass for Assembly	777 S. Figueroa St. Suite 4050 Los Angeles CA, 90017		1/9/2009	\$11.95	Breakfast
Bass for Assembly	777 S. Figueroa St. Suite 4050 Los Angeles CA, 90017		1/8/2009	\$11.95	Lunch
Black Eagle Wines	1700 L Street Sacramento, CA 95811	Wine Industry/Retail	3/29/2009	\$65.00	Wine gift set
CA Cable & Telecommunications Association	1001 K Street 2nd Floor Sacramento, CA 95814	Telecommunications	5/4/2009	\$63.23	Reception
CA Cable & Telecommunications Association	1001 K Street 2nd Floor Sacramento, CA 95814	Telecommunications	8/26/2009	\$22.28	Reception
CA Democratic Party	1401 21st Street, Suite 200 Sacramento, CA 95811		1/8/2009	\$73.26	Dinner
CA Tribal Business Alliance	1530 J Street, Suite 250 Sacramento, Ca 95814		1/14/2009	\$88.77	Reception/Dinner
Consumer Attorneys of CA	770 L Street, Suite 1200 Sacramento, CA 95814		4/27/2009	\$34.40	Reception
Consumer Attorneys of CA	770 L Street, Suite 1200 Sacramento, CA 95814		4/28/2009	\$34.24	Reception

Form 700 (2009 Annual)
Schedule D
Income - Gifts
Hector De La Torre

Various Healthcare/Life Science Entities - Sponsored by 13 entities, all of which paid less than \$50 per person for the event costs	1201 K Street, Suite 1010 Sacramento, CA 95814		1/28/2009	\$216.88	Reception/Dinner
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